

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Patent Application

Inventor:

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Case:

2-24-9-1-19-14-12

Serial No.:

09/938,107

Group Art Unit:

2839

Filed:

August 23, 2001

Examiner:

Khiem M. Nguyen

Title:

Optical Fiber Cable Apparatus Having Encased Ribbon Stack

ASSISTANT COMMISSIONER FOR PATENTS ALEXANDRIA, VA 22313-1450

SIR:

AMENDMENT

In response to the Office Action dated July 22, 2003, please amend the above-identified application as follows.

OCT 29 2003
TECHNOLOGY CENTER 2800

Michael A. Morra

PTO/SB/21 (08-03) Approved for use through 08/30/2003, OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE THAT! Under the Paperwork Reduction Act of 1995, no persons are required to respond t collection of information unless it displays a valid OMB control number. Application Number 09/938,107 **TRANSMITTAL** Filing Date August 23, 2001 **FORM** First Named Inventor Harold P. Debban Art Unit (to be used for all correspondence after initial filing) 2839 **Examiner Name** Khiem M. Nguyen Attomey Docket Number 2-24-9-1-19-14-12 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance communication Fee Transmittal Form Drawing(s) to Technology Center (TC) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC • Petition (Appeal Notice, Brief, Reply Brief) Amendment/Reply Petition to Convert to a Proprietary Information Provisional Application After Final Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Terminal Disclaimer Extension of Time Request Identify below): Return Postcard Request for Refund Express Abandonment Request CD, Number of CD(s) Information Disclosure Statement Remarks Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 Ŋ Ö SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Fitel USA Corp Individual name Signature Date CERTIFICATE OF TRANSMISSION/MAILING

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